LABORATORY REPORT

Basic Circuits & Systems Laboratory

This cover page must always be the top sheet

Course: ELEC 273   275   **Lab Section:** _____

(Circle)

Experiment No.: _____   **Date Performed:** 20 ___ – ___ – ___

YYYY – MM – DD

Experiment Title: _____

Name: _____   **ID No.:** _____

Lab Partner Name: _____   **Lab Partner ID:** _____

I certify that this submission is my original work and meets the Faculty's Expectations of Originality

Signature: _____ **Date:** 20 ___ – ___ – ___

YYYY – MM – DD